

PLEASE FOLD THIS SHIPPING DOCUMENT IN HALF AND PLACE IT IN A WAYBILL POUCH AFFIXED TO YOUR SHIPMENT SO THAT THE BARCODE PORTION OF THE LABEL CAN BE READ AND SCANNED. ***WARNING: USE ONLY THE PRINTED ORIGINAL LABEL FOR SHIPPING. USING A PHOTOCOPY OF THIS LABEL FOR SHIPPING PURPOSES IS FRAUDULENT AND COULD RESULT IN ADDITIONAL BILLING CHARGES, ALONG WITH THE CANCELLATION OF YOUR FEDEX ACCOUNT NUMBER.

From: Origin ID: GSHA (317) 123-4567

JOHN DOE

A1 HOSPITAL

1234 MICROBIOLOGY LANE

INDIANAPOLIS, IN 46202

FedEx
Express



J10161809810224

Ship Date: 21FEB11

ActWgt: 5.0 LB MAN

CAD: 823654/CAFE2472

Delivery Address Bar Code



Ref #

Invoice #

PO #

Dept #

SHIP TO: (317) 921-5500

BILL SENDER

MARK GLAZIER

INDIANA STATE DEPARTMENT OF HEALTH

550 W. 16TH ST.

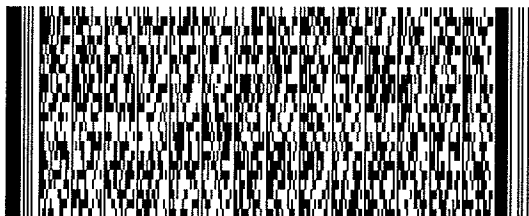
SUITE B

INDIANAPOLIS, IN 46202

TRK# 4815 8771 7921
0201

TUE - 22 FEB A1

PRIORITY OVERNIGHT

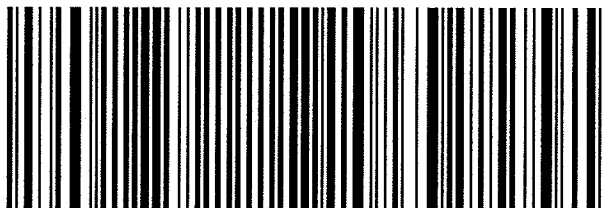


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